



Please type a plus sign (+) inside this box →

FEB 10 2003

Approved for use through 07/31/2003, OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PS Match & Return GP1615

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission
(excluding references)

4

Application Number	09/966,036
Filing Date	September 28, 2001
First Named Inventor	Dorrie M. Happ
Group Art Unit	1615
Examiner Name	Blessing M. Fubara

Attorney Docket Number

50623.132

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account Authorization 07-1850 <input checked="" type="checkbox"/> Postage Paid Return Postcard <input type="checkbox"/> Response to Office Action <ul style="list-style-type: none"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Petition for Extension of Time (month) (in duplicate) <input type="checkbox"/> Amendment Transmittal Letter (in duplicate) <input checked="" type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 and 3 References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <ul style="list-style-type: none"> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Submission of Formal Drawings (in duplicate) <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): International Search Report
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Victor Repkin, Reg. No. 45,039
Signature	
Date	February 5, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date:

February 5, 2003

Typed or printed name	Judi Stillwell		
Signature		Date	February 5, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED
FEB 12 2003
TECH CENTER 1600
U.S. PATENT & TRADEMARK OFFICE